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separated by from about 2 hours to about 7 hours.

drug in a patient in need of such treatment comprising administering to the patient a dosage form of a pharmaceutically acceptable salt of *d-threo*-methylphenidate providing an *in vivo* plasma concentration of said *d-threo*-methylphenidate comprising two maxima, wherein said maxima are temporally separated by from about 2 hours to about 7 hours, and wherein the magnitude of said maxima differ by no more than about 30 percent.--

## Remarks

After entry of the proposed amendment, claims 1, 3-8 and 11-14 will be pending in htis application. Claims 1-12, all the previously pending claims, were allowed in the prior application. New claims 13 and 14 recite methods of treating a disease with the dosage forms claimed in claims 28 and 29 of the parent application, now U.S. Ser. No. 5,837,284.

Applicants provide herewith copies of the references listed on the form PTO-1449 accompanying the Information Disclosure Statement previously submitted with their Continuing Prosecution Application Request. In addition, Applicants enclose herewith a copy of a Third Party Protest (hereinafter "the protest") filed in the Canadian Patent Office in connection with a Canadian patent application corresponding to the parent to this application. The protest alleges unpatentability of the Canadian claims over three references, or combinations thereof. The present application was filed in order to avoid any possible misunderstanding concerning the allowability of the pending claims, and to add claims directed to some preferred embodiments of the invention.

Applicants take this opportunity to address the arguments of the protest. The present invention provides a method for the once daily administration of a phenidate drug, especially d-threo-methylphenidate or a pharmaceutically acceptable salt. It will be appreciated that methyl phenidate, presently marketed in dl form under the trademark Ritalin®, is generally administered

The Canadian claims are directed to dosage forms for the oral administration of a methylphenidate drug, and methods for treating disease in a patient comprising administering such a dosage form. The claims are reproduced in Exhibit 1 attached hereto.